



University of  
South Australia



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# Clinical Facilitator Guidelines

## Midwifery

2023

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# GLOSSARY OF TERMS

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## **Academic Liaison**

Contact person assigned to the Clinical Facilitator to assist in academic matters. This may be the Course Coordinator.

## **Clinician**

Registered Midwife (RM) or Registered Nurse (RN) or operating within the health agencies.

## **Clinical Facilitator**

Clinical Facilitators are employed by the Clinical and Health Sciences (either directly or via secondment arrangements) to assist in the education, support and assessment of students undertaking clinical placement activities.

## **Clinical Placement Officer**

Clerical staff member appointed to assist in the Clinical and Health Sciences Clinical Placement Unit (CPU) to assist with coordination of student placements.

## **Clinical Placement Unit (CPU)**

Divisional unit staffed by non-academic staff to plan, manage and coordinate the field placement activities for the Division of Health Sciences.

## **Course**

A unit of study several of which contribute to a Program (Bachelor of Midwifery degree).

## **Course Coordinator**

Academic staff member responsible for the coordination of specific courses within the program.

## **InPlace**

The software program to assist students in the selection of their clinical placements and associated data management.

## **Mentor**

A mentor is an experienced staff member who provides an advisory role about ongoing developmental issues such as career planning and direction.

## **PebblePad**

An online platform where students document placement experiences and assessments which forms their E-portfolio. Clinical Facilitators have access to this platform. The platform allows real time access and provides a method of communication between the facilitator, the student and the university staff, through means of leaving comments and feedback.

## **Preceptor**

A clinician, working in association with the Clinical Facilitator and the student, provides workplace support to students. Preceptors are more commonly associated with students' clinical placements as they work with students to provide patient care and provide advice and guidance about day to day clinical activities.

## **Program**

A series of courses, having been accredited, being the requirements for an award e.g. Bachelor of Midwifery.

## **Program Director**

Academic staff member who is responsible for the coordination of programs or stages of programs.

# Introduction

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This document is a key resource for all Clinical Facilitators. Clinical Facilitators include those people directly employed by UniSA as well as those provided by a placement venue under reimbursement arrangements with UniSA Clinical and Health Sciences. This document is a supplement to the induction and support offered by the UniSA and the information available on the [Bachelor of Midwifery Clinical Facilitator site](#), the [Clinical Placement Unit \(CPU\)](#) site and relevant course websites.

## Aim and Objectives of Clinical Placements

The aim of clinical placements is to provide quality, diverse health care and midwifery practice experiences to enable students to learn from their clinical experiences and then be able to meet the course and program objectives. This enables the student to demonstrate the professional standards required to practice as a beginning Registered Midwife (RM) at the end of the program. Inquiry-based learning is a key educational philosophy of the programs offered by the Bachelor of Midwifery program at UniSA and requires students to engage in the learning process through problem solving, critical thinking, reflection and taking responsibility for their own learning.

Objectives for each course are available in the relevant Course Outlines and reflect the Universities Graduate Qualities. Further information about the University of South Australia Graduate Qualities may be found at the following [link](#).

Clinical Facilitators play an important role in a student's ability to achieve program, course and placement aims by ensuring that the educational experience is sound, and the student is sufficiently supported to enable them to succeed.

## Role Expectations

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### Clinical Placement Unit

Staff within the Clinical Placement Unit (CPU) coordinate student clinical placements. The CPU and the Midwifery team allocate students to placement based on placement objectives, student experiences and postcode. Specific venue information such as contact persons and venue requirements are also available and where appropriate provided to students and staff.

CPU staff will answer questions about student allocations, compliance of required conditional evidence and clinical venue organisational matters. Questions about academic course matters and/or student matters should be directed to the course specific Academic Liaison/Course Coordinator.

### Clinical Facilitators – Role description

Clinical Facilitators are employed by UniSA directly or the venue provides the facilitator (and is reimbursed by UniSA). The role is to assist in the education, support and assessment of students undertaking a clinical placement. Clinical Facilitators should be familiar with, and be working toward achieving, the University's Teaching and Learning principles as outlined in the Teaching and Learning Framework available from this link <https://unisa.edu.au/about-unisa/teaching-and-learning/>

- Demonstrate professional standards required to practice as a registered midwife in a variety of health care settings.
- Have a sound understanding of the educational issues associated with practice-based education, including the specific requirements of the course for which the staff member is employed.
- Remain up to date with specific UniSA and clinical venue policies and guidelines regarding clinical placement facilitation.
- Facilitate learning experiences outside the University in a professional setting relevant to the area of study.

- Promote and facilitate links between theory and practice for students.
- Obtain clear details of assessment criteria, evaluation/assessment feedback information, and indication of performance standards from Course Coordinators.
- Inform students clearly, at the commencement of the placement, about the purpose and method of the placement, orientation requirements, the timing of Portfolio activities and the dates for submission, and the relative weight and number of assessment tasks.
- Encourage students to develop skills in problem solving, critical, reflective and creative thinking.
- Meet and orientate students (as required by designated venue) on the first day of the clinical placement.
- Meet with students regularly to discuss progress and undertake assessment.
- Maintain regular contact (minimum contact weekly) with the UniSA Academic Liaison/Course Coordinator.
- Assess a student's work in a fair, consistent and constructive manner and provide a grade in consultation with experienced registered midwifery staff who have worked with the student or directly supervised their practice.
- Conduct a review of the student's performance mid-way in the placement to ensure alignment between Clinical Facilitator and registered midwives' (who have worked with the student or directly supervised their practice) assessment of the student's performance - and where the student is not meeting milestones instigate strategies to inform the student as to the areas they need to demonstrate improvement - or where warranted instigate a clinical challenge process.
- Provide written and oral feedback in the timeframe determined by the university to assist students to improve their performance during placement, and complete reports about student performance, including the instigation and actioning of the clinical challenge process as directed, and in consultation with the UniSA Academic Liaison/Course Coordinator.
- Maintain and submit records of all contact and discussion with students.
- Attend a UniSA Clinical Facilitator workshop prior to commencement of contract and on an annual basis.

**NOTE 1:** Clinical Facilitators are responsible for the support and education of the student on placement. They provide client/patient care only in accordance with this educational aim and with the explicit consent and support of the relevant venue staff. The RM employed by the venue continues to be accountable for care provision and must be consulted about such plans, actions and outcomes.

**NOTE 2:** There are obligations for nurses and midwives to report notifiable conduct to the Australian Health Practitioner Regulation Agency. The Guidelines for Mandatory Notifications are available at:  
<http://www.ahpra.gov.au/>

### Induction of Clinical Facilitators

At this time Clinical Facilitators will be provided with information about the courses and workloads and responsibilities including students with special needs, shift requirements, and assessment. Each Clinical Facilitator is assigned an Academic Liaison/Course Coordinator who is a member of the course teaching team and who will assist and provide information about all teaching and assessment matters. Clinical Facilitators will be provided with a copy of the relevant Course Outline and any other necessary documentation pertaining to their allocated students.

# Program Information IBMW

Further information is available from <https://study.unisa.edu.au/degrees/bachelor-of-midwifery>

		CLINICAL COURSES			THEORY COURSES		
	Course Code	Course Name	Units	Course Code	Course Name	Units	
<b>YEAR 1</b> Knowledge skills and attitudes for understanding			4.5	NURS 1074	Evidence Based Midwifery	4.5	
				BIOL 1047	Human Body 1	4.5	
	NURS 1056	Experiential Learning Activity: Midwifery Foundation Practicum 1	4.5	NURS 1075	Primary Midwifery Practice	9.0	
				BIOL 1048	Human Body 2	4.5	
				HLTH 1047	First Peoples' Health	4.5	
<b>YEAR 2</b> Knowledge skills and attitudes for intervention	NURS 2039	Experiential Learning Activity: Midwifery Development Practicum 2	4.5	BIOL 2056	Fetal and Maternal Pathophysiology	4.5	
				NURS 2042		Complex Care of the Woman	9.0
	NURS 2036	Experiential Learning Activity: Midwifery Practice Development Practicum 3	4.5	NURS 2038	Complex Care of the Neonate	9.0	
				PHAR 2025	Pharmacology and Pharmacotherapeutics for Midwives	4.5	
<b>YEAR 3</b> Knowledge skills and attitudes for professional practice	NURS 3052	Experiential Learning Activity: Midwifery Transition Practicum 4	9.0	NURS 3057	Women's Health Across the Lifespan	4.5	
				NURS 3054	Perinatal Mental Health and Wellbeing	9.0	
	NURS 3053	Experiential Learning Activity: Midwifery Transition Practicum 5	9.0	NURS 3047	Becoming a Midwife	4.5	
				NURS 3049	Midwifery Project	4.5	

## MANAGING CLINICAL PLACEMENT ACTIVITIES

In line with program teaching and learning principles of inquiry-based learning that promote learner independence, problem solving and reflective practice; students are assumed to be responsible for being participants in the learning process. Students are expected to do the following:

- Identify their individual learning needs in readiness for placement.
- Prepare for the clinical placement by reading and practicing skills as necessary.
- Openly communicate their needs and concerns with the relevant persons involved in their placement.
- Operate within the guidelines and regulations of the health agency and University.
- Participate in both their assessment and general evaluation of their practice experience.
- Be familiar and working towards the NMBA *Midwife Standards for Practice* (2018).
- Provide informed critique of educational and healthcare practices.

## Learning objectives

Bachelor of Midwifery students are required to focus their learning on placement through the development of a learning plan based on particular objectives. This written learning plan forms part of the student's Midwifery Portfolio and is maintained electronically.

*Recommendation See Appendix A - Student's Development of Learning Objectives for guidelines on assisting students to develop their own learning objectives.*

## Roles of Mentors and Preceptors

Mentors and preceptors are the RMs who work with students and provide feedback to Clinical Facilitators during the clinical placement. See Glossary for definitions. They do not replace the Clinical Facilitator. Preceptors usually work with students on a regular basis and play a major role in providing feedback about students' performances.

*Recommendation: In addition to the weekly student meeting also schedule at least weekly feedback sessions with preceptors and students to discuss student progress, remembering that confidential communication and documentation of students' progress is essential.*

## Observation of student performance

Observation and one-to-one teaching is an important part of clinical placement. You may spend a portion of some days working with one or two students, particularly where there are concerns about a student's performance. It is expected that facilitators will make face to face contact with students on more than one occasion each week, unless the arrangement is for telephone facilitation.

*Recommendation: Observation of students' performance is an important strategy to verify the feedback from others about students' progress.*

## Supporting Learning and Assessment of Student Performance

Clinical Facilitators are responsible for the support and education of the student on placement and this requires achieving a balance between supporting students to gain confidence in the placement environment and apply what they already know, while also learning new things. Clinical Facilitators also need to make assessments of how well students are performing against the course requirements. Each of the Experiential Learning Activity (ELA) courses is outlined on the [Bachelor of Midwifery Clinical Facilitator site](#) and defines the course aims and gives insight into what can be expected from the students.

Learning through clinical placement experience has many benefits for students. It provides the student with an opportunity to learn how to apply their theoretical knowledge in ways that are effective in practice. Clinical placement also helps students learn about the capabilities necessary for practice and to recognise when they need more information and where to find it in a practice setting. They get to experience the demands of actual health care delivery and how this can impact on clinical decision making. However, at the same time they are assessed as to the breadth and level of their performance and knowledge. This is why it is important for Clinical Facilitators to stay well informed about the specific course requirements rather than rely on only their broader experiences of what is appropriate practice for RMs in that particular care context. It is for this reason also that students may participate in various venue placement education or staff development opportunities but not without first achieving the stated course aims and objectives.

Effective clinical facilitation requires a repertoire of skills that allow the Clinical Facilitator to develop the necessary relationship with students that respects the student's individuality and learning needs at the same time as allowing appropriate assessment of student competency.

Some of the challenges of conducting assessment that relate to marking assessments as well as assessing clinical performance include:

- Being fair, equitable and objective.
- Understanding the assessment framework, tools and criteria against which judgements are made.
- Balancing a personal perspective of student performance against the university criteria (which includes the professional standards).



- Managing the consequences of assessment decisions.
- Managing the situation where you have to directly facilitate open communication and discussion of feedback between students and the staff in the venue /placement.

## Teaching students who have English as another Language (EAL) and international students

There is an increase in students for whom English is Another Language (EAL) studying at UniSA. These students can be permanent residents here in Australia or be here only while they study. This cohort of students reflects changes in the composition of our client/patient and health workforce populations.

Some students may not have previously experienced the Australian health care system. If fluency in English is limited they may need more time to respond in conversations. This extra time may be necessary for them to process the communication which often involves translation from English to their first language, formulation of a reply and translation of the reply into English.

It is the Clinical Facilitator's role to support the student in identifying and communicating such needs to the relevant placement staff and their preceptors so the placement experience is appropriately supportive. Academic Liaison/Course Coordinator staff may suggest additional strategies to help students improve their communication and assist facilitators in making assessments of the safety and effectiveness of student communication skills.

## First week of placement

### Orientation to the venue

Venues differ in how orientation is conducted. Sometimes this is undertaken by venue staff and in other places it is undertaken by Clinical Facilitators. Clinical Facilitators are encouraged to familiarise themselves with key venue policies such as S8 and IV medication administration by students, emergency phone numbers, injury and incident reporting, venue facilities including parking and security issues, staff roles, shift times and behaviour expectations, regular and emergency contact details and expectations for students.

All students are asked to bring evidence of **ALL** of the following which will be accessible in their online Passport to Placement which is on the PebblePad platform:

- Department for Communities and Social Inclusion (DCSI) National Criminal History Record Check Child Related Employment Screening only **required by all SA venues**
- National Police Certificate (NPC)
- Consent & Authority to Release Information Form
- CPR Certificate (current)
- Sunrise EMR certificate
- SA Health Deed Poll
- Health Care Worker Immunisation Screening Questionnaire and Certificate of Compliance
- Medication Calculation Results
- UniSA Child Safe Environments
- Blood Safe Online Module
- Hand Hygiene
- Manual Handling Certificate
- Undertaking a Safe Student Placement Work Health and Safety (WHS) certificate

The CPU has a Midwifery Student Checklist with all the requirements for students including what they must carry in their Passport to Placement. Compulsory Conditional Evidence Requirements can be found [here](#).

### The student group:

- Give students your contact details and encourage them to contact you with all questions and concerns.
- Confirm that students understand their portfolio assessment requirements and that you have access to the relevant online ELA workspace in PebblePad. You will need access to the student's portfolio collection and ELA workbook.

- Let the students know your expectations about how you conduct facilitation including that you will seek feedback from other staff about their progress. Explain how you will communicate this feedback to them and clarify that you are ultimately responsible for all assessments.
- Establish an agreed regular debriefing time and place. This may include group as well as individual sessions.
- Discuss the assessment requirements and your expectations.
- Clarify your expectations of how students will be involved in formative and summative assessments.

#### **Individual students:**

- Within the first two days ask the student about their strengths, limitations, placement expectations, what they plan to learn and how they will achieve this (strategies). Use the assessment items as a frame for this discussion and invite students to disclose (if they wish to) any issues associated with a Student Access Plan.
- Plan how and when you will communicate with each other (mode, time and location to allow private and extended conversations).

#### **During subsequent weeks**

- Contact the students at least twice weekly to support their learning and collect the evidence necessary for you to assess their competence. At each contact ask the student open-ended questions related to their knowledge skills and attitudes.
  - How comfortable are they with the placement/ practice experience?
  - Are there any issues with interactions with other staff and women and families?
  - What activities have they been involved in each shift and how useful are these in building learning, confidence? Consider the **breadth** and **level** at which students are practicing.
  - How they have performed in these and discuss their perceptions of their competence.
  - What feedback have they sought and from whom, what has this feedback been, how has it been recorded and how does this fit with their assessment of their performance? Regularly discuss each student's progress with their preceptor or other relevant staff members.
  - Is progress being made? (Consider Clinical Challenge if deficits continue)
- Discuss with students the staff feedback you have received. Invite RM staff to join these discussions if appropriate.
- Note any performance concerns and give the student formative feedback on managing the environment and improving their knowledge/practice. Inform the Academic Liaison/Course Coordinator of any concerns about a student that may impact on performance, as early as they are noticed, so this gives the student time to rectify.
- Ensure that Portfolio assessments are completed on time (extensions cause overlapping with subsequent assessments). Complete feedback summary each week and submit at the end of each week to the course Academic Liaison/Course Coordinator.
- PebblePad allows for real time access to the student's work. If you have concerned flag issues with the course coordinator or academic liaison early so they can also review the student's work and give advice as necessary.

#### **Working effectively with staff who supervise students in their clinical learning**

Initiate and maintain effective communication with venue staff to enable student outcomes to be achieved and reported. Contact the venue contact person and ward/unit relevant RMs to:

- Check that they have all the necessary information about the student placement.
- Clarify the match between their expectations and the requirements of the specific course objectives. Ensure they know students' performances are assessed on the course objectives.

Contact the preceptor/RMs working with the students (usually twice a week) and ask questions that will provide evidence for your developing assessment of each student's practice competence. Include in these questions the nature of challenges and support being given to the students.

### Communication with Academic Liaison and Course Coordinators

All students are allocated an Academic Liaison contact (who could be the Course Coordinator) to deal with the placement issues that arise. Where the Course Coordinator needs to be involved in matters the Academic Liaison will arrange this. **Email contact with the designated Academic Liaison should occur at least weekly during the placement to keep them informed of student progress.** Clinical Facilitators who are managing a number of students may find it useful to use the summary sheet (Excel document) which is provided on the [Bachelor of Midwifery Clinical Facilitator site](#)

### Performance assessment

Refer to the specific Course Aim and Objectives for assessment details for each course. Keep descriptive and specific records detailing student progress as the basis of the assessment process. Such notes may include:

- Discussions with the student about their learning needs and planned activities.
- Activities performed by the student and who supervised and observed these activities.
- Your reflections on the student's performances, with substantiating evidence.
- Plan of action associated with teaching and assessment with outcomes and evaluations.

### Clinical Challenge

The clinical challenge is a contract designed to facilitate targeted areas of learning for students where a significant and continuing deficit related to midwifery practice has been identified and may lead to a fail grade. This will include any areas of unsafe practices to the student or others. The challenge contract gives the student an opportunity to learn specific knowledge and skills that result in improved performance on placement. A formal clinical challenge document is prepared by the Academic Liaison/Course Coordinator in discussion with the Clinical Facilitator and provides the student with feedback, clear strategies and timelines to redeem the challenge. The clinical challenge may be used either in the experiential learning laboratories or in the clinical venue.

Prior to a clinical challenge being implemented, the student, the clinician and the lecturer/clinical facilitator should discuss the performance to detail the circumstances and areas for improvement as specified in the Clinical Challenge Contract (see appendix B).

Students for whom unsatisfactory performance on placement, misconduct on placement, and unprofessional conduct on placement applies the UniSA policy will be instituted as usual. See the current *Work Integrated Learning Policy and Procedures* [here](#)

### Implementing a Clinical Challenge

When a student's competence, either practical or professional remains below the expected level, (previous feedback has not changed student performance) the following steps will be taken: The Clinical Facilitator will interview the student, initiate counselling and negotiate, in consultation with the Academic Liaison or Course Coordinator, a Clinical Challenge contract.

A written clinical challenge contract will be issued clearly detailing:

- The specific course objective/NMBA standard not being achieved,
- The recommended strategies for improvement,
- Assistance available,
- Objective/standards outcomes that must be achieved for a pass grade,
- The time-span in which the objective/standard must be demonstrated,
- Venue for clinical challenge evaluation (either Practice Based, Laboratory or clinical venue),

- Agreement to the conditions of the clinical challenge by all concerned,
- Copies of the clinical challenge will be given to the: Student, Clinical Facilitator, Academic liaison staff member or Course Coordinator, and Program Coordinator and/or Director.

### Redemption of Clinical Challenge

Successful completion of the clinical challenge requires a demonstration of the specified objective/competency be achieved within the specified time-span. Evidence of the student's performance and other information impacting on the decisions regarding the redemption or failure of redemption of a clinical challenge are to be documented by the clinical facilitator.

Redemption of the clinical challenge contract requires collaborative discussion and negotiation between the student, RMs and others working with the student. The Clinical Facilitator may also review relevant documents prior to making the final decision.

It is expected that the Clinical Facilitator will seek assistance from the Academic Liaison/Course Coordinator regarding the implementation and assessment outcomes associated with any clinical challenge processes implemented. If the clinical challenge is not successfully completed, or, **if the student's performance is not maintained following a successful redemption of the clinical challenge, the student will receive a fail grade for the clinical assessment and will therefore fail the course.**

### Right of appeal – clinical assessment outcomes

In the event of a student appeal, the University appeals process will be adhered to. Please see the current [UniSA Assessment Policy and Procedures](#).

All medication administration or medication management errors are to be treated as **critical incidents** with the necessary University of South Australia incident report documentation completed and submitted as specified on the form. The incident should be reported to the Academic Liaison/Course Coordinator within 24 hours of the event.

### Management of documentation

#### Clinical Facilitators' notes of students' progress

Clinical Facilitators are to keep confidential, ongoing written records of interactions with students, concerns and progress toward learning outcomes and provide these to the Academic Liaison/Course Coordinator in cases where students are at risk, are removed from placement or fail the course.

#### Assessment items

Clinical Facilitators submit a final summary of the students' performance at the end of the placement to the Academic Liaison/Course Coordinator. They will also need to ensure that students have completed all Clinical Assessment Tools (CATs) for the course as well as a final Standards assessment.

### General Information

#### Restriction on the use of titles of Nurse and Midwife

Use of the titles 'nurse' and 'midwife' (along with registered nurse, nurse practitioner, enrolled nurse and midwife practitioner) are protected under the Health Practitioner Regulation National Law Act 2009 ('the National Law'), and in this State the Health Practitioner Regulation National Law (South Australia) Act 2010.

Consequently, these titles can only be used as detailed in the Act and students are required to use the terms 'Midwifery Student' when referring to themselves or signing documentation. It is the Clinical Facilitator's role to ensure that students always identify and communicate their role in the clinical setting.

## Student attendance

In all clinical courses students are required to attend placement for 5 shifts per week, over 7 days (or equivalent), for the placement period and rostered on early and late shifts as per the shift times of the venue. **They are required to attend placement on public holidays.**

If students are unable to attend a shift, they are required to notify the venue and the Clinical Facilitator, before the shift begins. Medical certificates are required if students are absent for more than three consecutive days, if they have had over three days absence within the placement. The certificate is to be forwarded to the Academic Liaison/Course Coordinator. A medical clearance to practice is required following injury, surgery or a serious medical illness requiring extended leave. Students are advised to contact the Course Coordinator prior to commencing a clinical placement course or their Clinical Facilitator if they are returning to placement.

Students must complete the minimum hours that they have been allocated, hence Clinical Facilitators may offer make up shifts. If makeup shifts are not available, the student may risk failing the placement. Students may be required to discuss their sick leave with the Course Coordinator/Program Coordinator or Program Director if success in the course is at risk.

If a student is unable to continue placement due to illness and fails the course, students are able to make an 'Application for Amendment to Enrolment and Fees in Special Circumstances' so should speak with an academic staff member.

Students may attend labours/births of their Continuity of Care Experience (CoCE) women if placement workload permits, however because the hours for CoCE is in addition to the hours required for placements, the student will need to make up this time. This is relevant if the birth they attend is in another venue and they need to leave the site of placement, OR if the birth occurs at the venue during their placement. Students are not able to miss placement shifts to attend antenatal or postnatal appointments for women they are following.

## UniSA Medicines Guideline

UniSA has developed a guideline outlining the scope of practice in medication management for midwifery students. The guideline is available on the [Bachelor of Midwifery Clinical Facilitator](#) site.

## Misconduct on a placement

Where a Course Coordinator, placement supervisor or Clinical Facilitator identifies a student whose:

- a) behaviour on the placement may contribute to risk for self, persons in the care of the placement provider, the placement provider, or a third party, or
- b) behaviour may constitute misconduct under [Statute 7 of the University of South Australia Statutes](#)

The student will be required meet with the Course Coordinator and/or Academic Integrity Officer. The student may be immediately removed from the placement at the discretion of the Course Coordinator, Program Coordinator/Director, placement supervisor or placement provider. If, as a result of this meeting, the Course Coordinator decides that the placement should be suspended and the student removed, the Course Coordinator will make a written recommendation, including reasons, to the Program Director.

## Behaviours that may result in students being suspended from placement

In line with the above misconduct policy, where a Clinical Facilitator identifies a student is:

- Behaving in a way that may contribute to risk for self, clients and/or the placement provider.
- Behaving in a disorderly, disruptive or offensive manner.

The Clinical Facilitator must notify the Academic Liaison/Course Coordinator of the student's misconduct as soon as possible and arrange for the student to have an interview with the Course Coordinator. Where a student has demonstrated the potential to cause harm while on placement, the student may be immediately suspended from placement. Students behaving in a disorderly or offensive manner are to be required to leave the placement premises

until the best action is decided by the Academic Liaison/Course Coordinator. The Course Coordinator is responsible for the coordination of investigations of alleged behaviours resulting in suspension from placement.

## Managing a grievance

All levels of dispute are to be managed in a professional and timely manner. Where the dispute relates to a difference of opinion (as opposed to harassment or discrimination) it is recommended that the individual concerned should organise a time to speak to the specific person involved. Depending on the nature of the concern the individuals may all wish to utilise support from others. In the student's case it is usually the Clinical Facilitator.

Students are advised that if they have an issue with the Clinical Facilitator and are dissatisfied with the response, they should initially contact their specific Academic Liaison/Course Coordinator. If such issues or concerns are not resolved with this process students are advised to make an appointment with the Program Director as soon as possible to minimise the negative impact on their progress through the course.

## Student accidents and incidents while on clinical placement

Clinical Facilitators need to assist students who are injured whilst on clinical placement to do the following:

- Obtain treatment for the injury.
- Inform the Academic Liaison/Course Coordinator.
- Inform the Clinical Midwife Consultant/Manager of the incident and complete any necessary accident incident requirements for the health care organisation - **not the venues Work Cover forms.**

Students are required to complete and return the University the 'Student Incident Report' **FS24** within 24 hours (see appendix D) of any incident. **This form also needs to be completed where a student is involved in a situation that is reported through a placement venue incident reporting processes (e.g. SLS, AIMS, incident reporting).**

Further student insurance details are available at: <https://i.unisa.edu.au/staff/finance/services-we-provide/insurance-landing-page/new-student-insurance/> When obtaining treatment for injury, students should be aware of the following:

- Students are regarded as members of the general public and medical expenses incurred on placement should initially be claimed on Medicare or private health insurance as applicable.
- Students are not covered by the Occupational Health Safety and Welfare Act as employees and do not receive workers compensation entitlements. Students are therefore advised not to complete Work Cover claim forms.
- Claims for hospital and medical expenses, including travel incidents to and from the placement, should be made through the student's personal accident insurance company (if they have a policy) or through the Student Plan administered by UniLife.
- As a requirement of regulations under the OHSW Act (1986)/OHSW Amendment Act (2005) every accident/injury to University staff, students, visitors, and voluntary helpers must be reported, irrespective of its seriousness, using the relevant OHSW procedure.

## Protecting students while on clinical placement

Students while on placement are potentially vulnerable and it is the Clinical Facilitator's responsibility to notify the Academic Liaison/Course Coordinator of any incident or concern where the student is or potentially could be compromised. Such circumstances may include:

- Participant or witness to a critical incident that may/has resulted in a report or investigation.
- Witness or be a victim of bullying, sexual harassment or other unacceptable behaviours by staff, clients or members of the public.
- Being asked to work in an environment with unsafe or inappropriate standards of practice.

Clinical Facilitators are responsible to act to protect students in situations or threat or compromise. All accusations and evidence of compromising behaviour must be reported to the Academic Liaison/Course Coordinator and acted on per contemporary workplace policy standards. University counsellors and or academic counselling should be instigated if required. The University 'Student Incident Report' should be completed for any incident that may result in the University's legal department being involved in both the short and long term (see Appendix D). Advice should be sought from the Academic Liaison/Course Coordinator if you have any concerns.

## CLINICAL PLACEMENT EVALUATION

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### Course and program evaluation processes

The University has a process for evaluating all programs, courses and for teaching on campus (*mycourseexperience*). Clinical placement education activities are evaluated through the National Placement Evaluation Centre (NPEC) surveys sent to the students following their placement and sent to each clinical placement venue twice a year.

## RESOURCES

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Name & Contact	Areas of support
<b>Clinical Placement Unit</b> City East Campus Playford Building P7-17 Email: <a href="mailto:cpuoffice@unisa.edu.au">cpuoffice@unisa.edu.au</a> Phone: (08) 8302 2214 Fax: (08) 8302 2830	Planning, coordination and allocation of clinical placement needs for specific courses.  Management of student compliance with required conditional evidence.
Program Director: Angela Brown Program Coordinator: Sharon Rance Academic Services Officer: Dianne Stubbings	<a href="mailto:Angela.Brown@unisa.edu.au">Angela.Brown@unisa.edu.au</a> <a href="mailto:Sharon.rance@unisa.edu.au">Sharon.rance@unisa.edu.au</a> <a href="mailto:Midwifery.enquiries@unisa.edu.au">Midwifery.enquiries@unisa.edu.au</a>
<b>Human Resources</b> Clinical and Health Sciences P6-29A (via Division Services) <a href="mailto:HSC-casualsinhealth@unisa.edu.au">HSC-casualsinhealth@unisa.edu.au</a>	Individual employment contracts and time sheets
<b>Bachelor of Midwifery Clinical Facilitator site</b>	<a href="https://lo.unisa.edu.au/course/view.php?id=4342">https://lo.unisa.edu.au/course/view.php?id=4342</a>

# APPENDIX A - GUIDE TO WRITING LEARNING OBJECTIVES

A **learning objective** is a statement that makes explicit a measurable achievement resulting from specific learning activities within a definite time span. When you write a learning objective it needs to contain 3 main elements. It needs to state clearly the:

- **Performance** - what is to be achieved.
- **Criterion** - standard to be achieved.
- **Conditions** including time span.

Use the **S.M.A.R.T.** framework - **s**pecific, **m**easurable, **a**chievable, **r**ealistic and has a **t**imeframe.

<p><b>SPECIFIC</b></p>	<p>A learning objective should specify clearly <b>WHAT</b> you want to achieve.</p> <p>A learning begins with an action verb like:</p>	<p>Questions to help you think about this:</p> <ul style="list-style-type: none"> <li>• What exactly am I going to achieve?</li> <li>• What strategies have I identified?</li> <li>• Is the objective clear and understandable?</li> <li>• Have I used an 'action' verb (examples below)?</li> <li>• Is it clear what needs to happen?</li> <li>• Is the outcome clear?</li> <li>• Will this objective lead to the desired result?</li> </ul>
<p><b>MEASUREABLE</b></p>	<p>A learning objective should be about developing new knowledge and make clear how your progress can be measured.</p>	<p>How will I know that I have achieved my learning goal? How can the changes be measured?</p>
<p><b>ACHIEVEABLE</b></p>	<p>A learning objective must be possible to achieve both in terms of your role (student nurse) and the amount of time on placement.</p>	<p>Can I achieve this objective within the stated timeframe? Have I considered any limitation or constraints? Can I achieve this objective by using the resources that I have identified? Is this objective possible?</p>
<p><b>REALISTIC</b></p>	<p>A learning objective must be realistic in terms of the resources you have available to you as a student.</p>	<ul style="list-style-type: none"> <li>• Do I have access to the resources that I need to achieve this objective?</li> <li>• Do I need to review my learning needs or adjust my learning objective?</li> <li>• Is this objective possible to achieve?</li> </ul>
<p><b>TIMEFRAME</b></p>	<p>A learning objective must include a timeframe for when a measurement can be taken to show progress and it must take account of the timeframes possible during your placement.</p>	<p>When will this objective be accomplished?</p> <p>Is there a stated deadline for achieving this objective?</p> <p>Is this objective achievable in the timeframe stated?</p>



# APPENDIX B - CLINICAL CHALLENGE CONTRACT



## Clinical Challenge

### Preamble

A Clinical Challenge is a document that is developed in response to an identified deficit related to student midwifery practice, either in the Horizon Hospital & Health Service (HHHS) or in a clinical placement venue. The intent of the Clinical Challenge is to assist the student to recognise areas of identified clinical deficit or inappropriate behaviours, so that they can focus on improving their practice in these identified areas. Prior to the implementation of a Clinical Challenge the student, the clinician and the lecturer/clinical facilitator should discuss the student's performance to identify areas of strengths and deficits. Other than in instances where students have been precluded or suspended from clinical placement, students will be placed on a Clinical Challenge to give them an opportunity to improve their performance to assist in successfully completing the placement and avoiding a fail grade for the course.

Students will be offered only one (1) Clinical Challenge contract in each clinical course. This means that if a student passes a Clinical Challenge but is subsequently found to be practicing below the standards expected to pass the course, a fail grade will be recorded and the student removed from placement. A student may be removed from the clinical venue by UniSA staff or at the request of the venue at any time during the placement for unsafe practice or inappropriate behaviour as outlined in the Assessment Policy and Procedure Manual (2022) Section 4.5 & 4.6. This will result in a fail grade for the course. Students who fail a clinical placement course will be required to undertake a remedial workshop and pass a clinical assessment before attempting the course again. Further information can be found at <https://i.unisa.edu.au/policies-and-procedures/codes/assessment-policies/>

### Method of implementing Clinical Challenge

When a student's competence, either practical or professional, is assessed at below the expected level by a Registered Midwife in the clinical setting, the clinical facilitator will undertake the following steps:

1. The lecturer/clinical facilitator will discuss identified deficits with the student, initiate counselling (if required) and negotiate a Clinical Challenge, in consultation with the Academic Liaison/ Course Coordinator.
2. A written Clinical Challenge will be issued, detailing:
  - The specific course objective/s and or NMBA midwife standards for practice not being achieved;
  - The recommended strategies for improvement;
  - Assistance available;
  - Objective/standards outcomes that must be achieved for a pass grade;
  - The time-span in which the objective/standard must be demonstrated;
  - Venue for Clinical Challenge evaluation (either HHHS or clinical venue);
  - Agreement to the conditions of the Clinical Challenge by all concerned.
3. Copies of the instigated **signed** Clinical Challenge will be scanned by the Clinical Facilitator and emailed to the:
  - Student
  - Academic Liaison/Course CoordinatorThe document may be forwarded to the Program Coordinator/Director or Head of School as required for information or follow up.

### Redemption of Clinical Challenge

- Successful completion of the Clinical Challenge requires a demonstration of the achievement of specified objective/standards within the specified time-span. Evidence of the student's performance and other information impacting on the decisions regarding the redemption or failure of redemption of a Clinical Challenge are to be documented by the Clinical Facilitator. The Clinical Facilitator will seek assistance from the Academic Liaison/Course Coordinator regarding the implementation and assessment outcomes associated with any Clinical Challenge processes implemented. If the Clinical Challenge is not successfully completed, or, if the student's performance is not maintained following a successful redemption of the Clinical Challenge, the placement will be immediately suspended, and the student will receive a fail grade for the clinical assessment and the course.
- Method: The **FINAL** signed copy will be scanned by the Clinical Facilitator and emailed to the Academic Liaison/Course Coordinator. The final signed copy should be saved in the student file and forwarded to the Course Coordinator, Program Director and/or Head of School as required for information or follow up.

*Please retain this page as part of the Clinical Challenge document*

**STUDENT NAME:** ..... **ID NUMBER:**.....

**COURSE:** ..... **STUDY PERIOD:**.....

**PROGRAM:**.....

**CLINICAL VENUE:**.....

**CLINICAL FACILITATOR:** .....

**CONTRACT START DATE:**..... **FINISH DATE:**.....

**Performance Deficit Identified**

*(Document in accordance with course objectives/NMBA midwife standards for practice. Include a brief statement of evidence & delete NMBA standards not applicable to this challenge THEN DELETE THIS SENTENCE IN BRACKETS)*

It has been identified by the Clinical Facilitator that..... (student name)

has.....

This is evidenced by

- ...
- ...
- ...

and aligns with the following NMBA Midwife standards for practice (2018) *(delete those not applicable; add exemplar statements where applicable THEN DELETE THIS SENTENCE IN BRACKETS)*

Standard 1: Promotes health and wellbeing through evidence-based midwifery practice

The midwife supports women’s wellbeing by providing safe, quality midwifery health care using the best available evidence and resources, with the principles of primary health care and cultural safety as foundations for practice.

The midwife:

- 1.1 identifies what is important to women as the foundation for using evidence to promote informed decision-making, participation in care, and self-determination
- 1.2 accesses, analyses, and uses the best available evidence, that includes research findings, for safe, quality midwifery practice
- 1.3 uses health assessment and health education to support birth and reproductive health, and minimise the potential for complications
- 1.4 undertakes ongoing processes of reflection to ensure professional judgements acknowledge how personal culture impacts on practice
- 1.5 supports access to maternity care for the woman
- 1.6 supports the development, implementation and evaluation of evidenced-based health initiatives and programs, and
- 1.7 identifies and promotes the role of midwifery practice and the midwifery profession in influencing better health outcomes for women.

Standard 2: Engages in professional relationships and respectful partnerships

The midwife establishes and maintains professional relationships with the woman by engaging purposefully in kind, compassionate and respectful partnerships. The midwife will also engage in professional relationships with other health practitioners, colleagues and/or members of the public. These relationships are conducted within a context of collaboration, mutual trust, respect and cultural safety.

The midwife:

- 2.1 supports the choices of the woman, with respect for families and communities in relation to maternity care

- 2.2 partners with women to strengthen women's capabilities and confidence to care for themselves and their families
- 2.3 practises ethically, with respect for dignity, privacy, confidentiality, equity and justice
- 2.4 practises without the discrimination that may be associated with race, age, disability, sexuality, gender identity, relationship status, power relations and/or social disadvantage
- 2.5 practises cultural safety that is holistic, free of bias and exposes racism
- 2.6 practises in a way that respects that family and community underpin the health of Aboriginal and/or Torres Strait Islander Peoples
- 2.7 develops, maintains and concludes professional relationships in a way that differentiates the boundaries between professional and personal relationships, and
- 2.8 participates in and/or leads collaborative practice.

### Standard 3: Demonstrates the capability and accountability for midwifery practice

The midwife is accountable to the woman for safe and competent practice. The midwife is also accountable to themselves, the NMBA, their employer, the public and the profession for practice that includes ongoing improvement, self-management, and responding to concerns about other health professionals' capability for practice.

The midwife:

- 3.1 understands their scope of practice<sup>9</sup>
- 3.2 practises within relevant legal parameters and professional standards, codes and guidelines
- 3.3 participates in own continuing professional development to maintain the required knowledge and skill base for safe and effective practice
- 3.4 contributes to a culture that supports learning, teaching, knowledge transfer and critical reflection
- 3.5 engages in timely consultation, referral and documentation
- 3.6 uses relevant processes to identify, document and manage complexity and risk
- 3.7 recognises and responds appropriately where safe and quality practice may be compromised, and
- 3.8 considers and responds in a timely manner to the health and wellbeing of self and others in relation to the capability for practice.

### Standard 4: Undertakes comprehensive assessments

The midwife in all contexts of practice continuously gathers, critically analyses and uses information and evidence to inform, validate and/ or improve midwifery practice.

The midwife:

- 4.1 works in partnership to determine factors that affect, or potentially affect, the health and wellbeing of women, communities and populations
- 4.2 uses assessment techniques to systematically collect relevant and accurate information
- 4.4 analyses information and data and communicates assessments and anticipated outcomes as the basis for midwifery practice, and
- 4.4 assesses the resources that are available to inform planning.

### Standard 5: Develops plans for midwifery practice

The midwife critically analyses information and evidence to make professional judgements in planning for practice.

The midwife:

- 5.1 interprets assessment data and best available evidence to develop a plan for practice
- 5.2 collaboratively develops plans until options, priorities, goals, actions, anticipated outcomes and timeframes are agreed with the woman, and/or relevant others
- 5.3 co-ordinates resources effectively and efficiently for planned actions, and
- 5.4 documents, evaluates and modifies plans to facilitate the anticipated outcomes.

### Standard 6: Provides safety and quality in midwifery practice

The midwife uses comprehensive knowledge and skills to safely and effectively achieve the best possible midwifery practice outcomes.

The midwife:

- 6.1 actively contributes to quality improvement and research activities
- 6.2 practises to achieve the agreed goals and anticipated outcomes that meet the needs of the woman
- 6.3 is responsible for consultation and referral and/or escalation in situations that are outside the individual's scope of practice, and
- 6.4 provides and accepts effective and timely direction, allocation, delegation, teaching and supervision

### Standard 7: Evaluates outcomes to improve midwifery practice

The midwife takes responsibility for the evaluation and continuous improvement of practice.

The midwife:

- 7.1 evaluates and monitors progress towards planned goals and anticipated outcomes
- 7.2 revises plan and actions based on evidence and what is learned from evaluation
- 7.3 uses evaluation and reflection to inform future practice and professional development

**Objectives to be attained for successful completion of this Clinical Challenge**

**Strategies Recommended**

*(Including support to be given by University staff)*

**Student Agreement to Clinical Challenge Contract**

I agree to the Clinical Challenge contract being undertaken by..... (Clinical Facilitator) at  
..... (venue)

Student Signature: .....Date: .....

Clinical Facilitator Signature: .....Date:.....

**FINAL OUTCOME** Redeemed  Not Redeemed   
**CLINICAL FACILITATOR COMMENTS:**

**If the student's performance is not maintained following a successful redemption of this Clinical Challenge, the student will receive a fail grade for the clinical assessment component of the course. Only one (1) Clinical Challenge is permitted per course.**

**Students who have been unsuccessful in redeeming their Clinical Challenge will fail their clinical performance assessment.**

Student Signature: ..... Date: .....

Lecturer/Clinical  
Facilitator Signature: ..... Date: .....

**Please ensure signed copies are forwarded by the clinical facilitator to the:** Student, Academic liaison staff member/ Course Co-ordinator & Program Coordinator/Director.

# APPENDIX C - STUDENT INCIDENT REPORT



UNIVERSITY OF SOUTH AUSTRALIA  
Finance Unit FS24

## STUDENT INCIDENT REPORT

### UNISA INSTRUCTIONS:

This form is used to report: any incident involving or causing injury to students participating in any University approved activities such as placement, field trips, site visits, work experience, lectures etc.

Once the form is completed, send the:

1. original copy to the [Insurance Office](#), Level 3, 101 Currie Street, Adelaide 5000.
2. copies to Program Director; Placement Facilitator/Coordinator; Student.

Further details and questions regarding Insurance are to be directed to the UniSA Insurance Office:

Email: [insurance@unisa.edu.au](mailto:insurance@unisa.edu.au)

Phone: +61 8 8302 1678

Fax: +61 8 8302 1699

### INFORMATION:

Students undertaking approved University activities are provided with Personal Accident insurance through the University. This insurance is designed to cover death, disablement or loss of income following an accident. Limited cover is provided for medical expenses, but does not apply to any part of an expense that is wholly or partially claimable through Medicare. The University is not responsible for expenses incurred by the student that are not recoverable from insurance (e.g. policy excesses).

For enquiries regarding insurance benefits or to enquire about making an insurance claim please contact the [Insurance Office](#).

Injured Students should be directed to seek appropriate medical care in a public hospital (unless they hold their own private hospital cover).

Students on placement are not employed by the Host Organisation. Therefore no Workers Compensation applies and WorkCover forms should not be used.

STUDENT DETAILS			
Student Name:		DOB:	
Student ID:		Gender:	M / F
Student Email:		Student Phone:	
Program of Study:		Program Director:	
INCIDENT DETAILS (attach a separate page if more space is required)			
Date of incident:		Time of incident am/pm:	
Incident occurred while on: Placement / Field Trip / Other (please specify):			
Address / Location where incident occurred:			
Witness name and position:			
Witness address and phone:			
Incident description: (Include what the student was doing at the time the incident occurred and who else was involved etc).			
Location and nature of Student injury:			
Description of action taken (first aid/medical):			
Description of follow-up action required:			
Signature of Supervisor/Coordinator:		Date:	
Name of Supervisor/Coordinator: (please print)		Phone:	
Signature of Student:		Date:	